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February 18, 2015

Larry Gasco, Ph.D., Chair
Los Angeles County Mental Health Commission
550 S. Vermont Avenue
Los Angeles, CA 90020

Dear Dr. Gasco:

Thank you for your letter and for welcoming me at Mental Health Commission/Service Area Advisory Committee (SAAC) Chair's meeting and the joint Public Health Commission/Mental Health Commission meeting last week. They were important opportunities to hear from the Commissioners, as well as from consumers, clients, patients, advocates, providers, and other stakeholders on the potential implications of the agency model. These meetings are also critical to help fulfill the Board's direction to the Interim Chief Executive Officer (CEO) to "establish a stakeholder/public participation process, including the Los Angeles County Mental Health and Public Health Commissions, to ensure that their input is considered in the report." I would welcome any input related to the Board motion, including specifically as you note on "the procedures used to ensure citizen and professional involvement at all stages of the planning process."

As has been discussed at our previous meetings together, the process for developing the response to the Board's motion is designed to take into account a broad set of perspectives, including that of the Board-appointed Commissions, on the Board motion. Regarding the external stakeholders consulted, the Department of Health Services (DHS), the Department of Mental Health (DMH), and the Department of Public Health (DPH) leadership were asked to identify those groups that should be proactively involved by the CEO's office in a stakeholder engagement process. Other groups who self-identified as being interested have also been included. The full list of external stakeholders is attached to this letter. While stakeholder input sessions are naturally ongoing, we have accommodated all requests with interested parties, often with specific individuals or groups present at several meetings. At many of these venues, County staff have also been present and offered their perspectives. In addition, we also are seeking input from internal County staff, including directly from executive leadership and

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front-line staff, and as summarized by the department heads themselves. Additionally, there are currently seventeen inter-departmental workgroups established on a number of clinical, programmatic, and administrative topics to ensure involvement from those with particular knowledge on a given topic.

The report will focus specifically on the five issues outlined in the motion: “proposed structure to accomplish” the agency, “proposed implementation steps”, “time frame for achievement” of the agency, and “the benefits as well as drawbacks” of the agency. In line with the Board’s motion, the Interim CEO, County Counsel, and the Department of Human Resources will work in conjunction with DHS, DMH, DPH, and the Agricultural Commission on the motion response. CEO and Departmental leadership will review and edit the document prior to its release to the public, anticipated on March 13, 2015. In recognition that stakeholders have an understandable interest in providing input to the report before it is drafted, as well as reacting to a draft version before it is final, we have extended the timeline to accommodate a 30-day open comment period following release of the draft report to the public. During this time, written stakeholder comments are encouraged.

During the same 30-day period, the CEO’s office will host a number of public convenings to solicit oral input. The affected County Departments have been and will continue to be involved in the planning of these sessions. I also welcome your input, and that of other stakeholders, provided to me directly or as given to Departmental leadership. The report will be modified to take into account comments that help to more completely address the five questions raised by the Board and will be released to the Board as a final version by May 12, 2015. All written comments will also be included as an appendix to the final report so that the specific concerns or ideas from stakeholders can be seen in their entirety and will be transparent to the public. Obviously, any steps taken after this 120-day period will depend on the action taken by the Board at that time.

Because your letter, and your previous letter to the Board of Supervisors dated January 23, 2015, includes in it reference to the Welfare and Institutions Code Section 5604.2.4, and an interpretation of that language as applied to this current situation, I would suggest we have a joint conversation with County Counsel who is best situated to weigh in on issues that are legal in nature. If you are interested in such a conversation, please let me know who should be included from the Commission. If it is your preference to call Counsel directly, please let me know and I will provide you with the most appropriate contact.

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Thank you for your continued commitment to the residents of Los Angeles County. I look forward to working collaboratively with you in the coming weeks and months. If you have any questions, please contact me at (213) 974-1160.

Sincerely,



Christina R. Ghaly, M.D.
Director of Health Care Integration

CRG:jp

Attachment

c: Each Supervisor
County Counsel
Executive Office, Board of Supervisors
Health Services
Mental Health
Public Health
Mental Health Commission
Public Health Commission
SAAC Chairs

Health Integration External Stakeholders

ACN Advisory Group
AFL-CIO
AFSCME
AIDS Project Los Angeles
Antelope Valley Partners for Health
Asian Client Coalition
Asian Pacific Policy & Planning Council (A3PCON)
Association Community Human Services Agency (ACHSA)
Black Los Angeles County Client Coalition (BLACCC)
California Alliance of Information and Referral Services
California Association of Alcohol and Drug Program Executives (CAADPE)
California Center for Public Health Advocacy
California Community Foundation
California Endowment
CIR
Community Clinic Association (CCALAC)
Community Health Councils
Community Partners in Care
Cooperation for Supportive Housing
DMH Faith-Based Advocacy Council
Empowerment Congress
Greater LA Black Infant Health Consortium
Hospital Association of Southern California (HASC)
Housing Trust Advisory Group
Housing Works
Insure the Uninsured Project (ITUP)
IOUE
LA Care Health Plan
LA Homeless Service Authority
Latino Client Coalition
Los Angeles County Client Coalition (LACCC)
Local 1083, 36, 2712, 3511 & 1921
Maternal & Child Health Access
Mental Health Advocacy/Legal Advocates
MHS Oversight & Accountability Commission (MHSOAC)
National Alliance on Mental Illness (NAMI)
National Alliance on Mental Illness Urban LA
Neighborhood Legal Services of Los Angeles County
Project Return Peer Support Network
Public Health Alliance of Southern California
Prevention Institute
Roybal Institute/USC
Service Area Advisory Committee Chairs (plus 8 Service Areas)
SEIU Local 721
Southern California Association of Non-Profit Housing
Southern California Public Health Association

System Leadership Team (SLT)
Teamsters Local 911
UAPD
UCLA, Fielding School of Public Health
Under-Represented Ethnic Population (UREP)
U.S. Department of Health and Human Services
Promotoras Initiative Steering Committee
USC, Environmental HS Department
Western Center on Law & Poverty

Commissions

Commission on Alcohol and Other Drugs
Commission on HIV
Commission on the Status of Women
Hospital and Health Delivery Commission
Mental Health Commission
Public Health Commission